

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

ADDRESS (number and street)

333 S. WABASH

43-S

☐Check if different
than previously
reported. (ACC)

CHICAGO

IL

60604

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00078287

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

16

2008

through

11

24

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Karen E. Melchert

Signature of Treasurer

Electronically Filed by Karen E. Melchert

Date

12

02

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		25248.23
(b) Cash on Hand at Beginning of Reporting Period	245.56	
(c) Total Receipts (from Line 19)	5655.80	90643.59
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5901.36	115891.82
7. Total Disbursements (from Line 31)	17.00	110007.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5884.36	5884.36
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4270.16	53374.84
(i) Itemized (use Schedule A)		
(ii) Unitemized	1385.64	37268.75
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	5655.80	90643.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	5655.80	90643.59
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5655.80	90643.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5655.80	90643.59

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17.00	207.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	17.00	207.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	73300.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	36500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17.00	110007.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17.00	110007.46

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5655.80	90643.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5655.80	90643.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17.00	207.46
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17.00	207.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Amy Adams

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15638

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

George Agyen

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15639

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Michael Anway

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15685

Amount of Each Receipt this Period

54.17

Contribution

SUBTOTAL of Receipts This Page (optional)

137.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Daniel Auslander

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15640

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Darci Beacom

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15641

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeffrey Becker

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15642

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

125.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Jacquelyne Belcastro

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15643

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

John Bloedorn

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15578

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Larry Boysen

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15686

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

129.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Patty Bridger

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15687

Amount of Each Receipt this Period

62.50

Contribution

B.

Full Name (Last, First, Middle Initial)

Nancy Bufalino

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15644

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

James Casimir

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15645

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

145.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

John Ciabattoni

Mailing Address 333 S. Wabash

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15646

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Bruce Cluskey, q

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15647

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Michael Coffey

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15632

Amount of Each Receipt this Period

26.00

Contribution

SUBTOTAL of Receipts This Page (optional)

109.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Charles Colburn

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15648

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Terry Cosgrove

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15649

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Kathleen Cunning

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15688

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

145.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Heather Davis

Mailing Address 333 S. Wabash
43rd Floor

City State Zip Code
Chicago IL 60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15689

Amount of Each Receipt this Period

62.50

Contribution

B.

Full Name (Last, First, Middle Initial)

Jeffrey Day

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15579

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Devereux

Mailing Address CNA Plaza

City State Zip Code
Chicago IL 60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15683

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

137.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Nicholas Diacou

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15580

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Bonnie Diehl

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15581

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Thomas Dunlop

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15582

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Steven Earley

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.15583

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Warren Edwards

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15650

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

George Fay

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15702

Amount of Each Receipt this Period

83.34

Contribution

SUBTOTAL of Receipts This Page (optional)

150.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Diane Ferro

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15651

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael Fitzgerald

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15690

Amount of Each Receipt this Period

62.50

Contribution

C.

Full Name (Last, First, Middle Initial)

Brian Frankl

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15585

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

129.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Fred Garrett

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15587

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jamie Gibbins

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15588

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Pamela Gillette

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15589

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Brian Granstrand

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15593

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Robert Grob

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15595

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Lynn Gugenheim

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15691

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

112.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Timothy Hagen

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15652

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Timothy Haggerty

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.15596

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Gary Hall

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15681

Amount of Each Receipt this Period

42.00

Contribution

SUBTOTAL of Receipts This Page (optional)

108.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

John Hall

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15633

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John Hanrahan

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15597

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dennis Hemme

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15692

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

117.50

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 42

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

John Hennessy

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.15598

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Robert Hides

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.15599

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Holtrup

Mailing Address 333 S. Wabash

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.15653

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

91.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Jacqueline Johnson

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15654

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Daniel Jordan

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA InsuranceOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15601

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Robert Keith

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15693

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

129.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Susan Kelly

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15655

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael Kennemer

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15602

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Thomas Kocaj

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15656

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

108.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Michael Komoll

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15603

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Robert Koza

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15657

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

John Landenberger

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15658

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

108.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Michael Levins

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15605

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Heather Libby

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15606

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Peter Lies

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15659

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

91.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Donny Lippard

Mailing Address 333 S. Wabash

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15694

Amount of Each Receipt this Period

62.50

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael Mallon

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15660

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Joseph Manero

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15609

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

129.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Robert Mann

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15695

Amount of Each Receipt this Period

62.50

Contribution

B.

Full Name (Last, First, Middle Initial)

Marilou McGirr

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15661

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Richard McGregor

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15662

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

145.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Craig Meadors

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15684

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Karen E. Melchert

Mailing Address 333 S. Wabash
43rd Floor

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15663

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Stephen Menke

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15664

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 42

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Craig Mense

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: SA11AI.15703

Amount of Each Receipt this Period

83.34

Contribution

B.

Full Name (Last, First, Middle Initial)

Brian Mibus

Mailing Address CNA Plaza

City

Chicago

State

ID

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA InsuranceOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: SA11AI.15610

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Christine Michals-Bucher

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNAOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	8

Transaction ID: SA11AI.15611

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 42

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

William Morgan

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15665

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Timothy Morse

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.68

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15612

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

William Nachtsheim

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15696

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

129.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Jeffrey Neuenschwander

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15667

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Robert Nienaber

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15635

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)

James O'Malley

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15636

Amount of Each Receipt this Period

40.00

Contribution

SUBTOTAL of Receipts This Page (optional)

121.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Lawrence Pagliaro

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15613

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

David Perry

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15668

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

William Phillips

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15615

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

91.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Fred Piertropola

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15669

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Thomas Pontarelli

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15704

Amount of Each Receipt this Period

83.34

Contribution

C.

Full Name (Last, First, Middle Initial)

Richard Pye

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15670

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

166.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

James Ramsdell

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15616

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mark J Reilly

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15617

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mark L Reilly

Mailing Address CNA Plaza

City

CNA Plaza

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15618

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Mary Ribikawskis

Mailing Address CNA Plaza

City

Chicago

State

ID

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15619

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Melville Sampson

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15620

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Matthew Sasso

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15621

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Douglas Schaeffer

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15622

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael Sehr

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15697

Amount of Each Receipt this Period

62.50

Contribution

C.

Full Name (Last, First, Middle Initial)

Andrew Shapiro

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15698

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

David Smith

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15671

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Ralph Soletti

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15673

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Michael Stapleton

Mailing Address 333 S. Wabash

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15699

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

145.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Ronald Stegeman

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15674

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Karen Stuttman

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15675

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

John Tatum

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15676

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

125.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Teri Tegtman

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15625

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jennifer Throm

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15626

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Tjards

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15627

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Cynthia Traczyk

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15677

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Marie Usher

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15678

Amount of Each Receipt this Period

41.67

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeffrey Vankley

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15679

Amount of Each Receipt this Period

41.67

Contribution

SUBTOTAL of Receipts This Page (optional)

125.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Richmond Waller

Mailing Address 333 S. Wabash

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15680

Amount of Each Receipt this Period

41.67

Contribution

B.

Full Name (Last, First, Middle Initial)

Gregory Weiland

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15629

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Stephen J. Westman

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15701

Amount of Each Receipt this Period

62.50

Contribution

SUBTOTAL of Receipts This Page (optional)

129.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 42

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Joe Wolfe

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15630

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Robert Wolfe

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60685

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA Insurance

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15631

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Wurzler

Mailing Address CNA Plaza

City

Chicago

State

IL

Zip Code

60604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNA

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.15682

Amount of Each Receipt this Period

42.00

Contribution

SUBTOTAL of Receipts This Page (optional)

92.00

TOTAL This Period (last page this line number only)

4270.16

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 42

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

A.

Full Name (Last, First, Middle Initial)

Shore Bank

Mailing Address 7936 S. Cottage Grove

City
Chicago

State
IL

Zip Code
60619

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15706

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17.00

SUBTOTAL of Disbursements This Page (optional)

17.00

TOTAL This Period (last page this line number only)

17.00